

AUG-06-2004 16:28

CONNOLLY BOVE LODGE & HUTZ
RECEIVED
CENTRAL FAX CENTER

202 293 6229 P.01/06

AUG 06 2004

OFFICIAL

FAX TRANSMISSION

DATE: August 6, 2004

PTO IDENTIFIER: Application Number 09/527,028-Conf. #1839
Patent Number

Inventor: Sylvie Veriac et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (703) 872-9306

FROM: CONNOLLY BOVE LODGE & HUTZ LLP

John A. Evans

PHONE: (202) 331-7111

Attorney Dkt. #: 20198-00053-US

PAGES (Including Cover Sheet): 6

CONTENTS: Change of correspondence address
Fee Transmittal (1 page);
ONE MONTH Request for Extension of Time Under 37 CFR 1.136(a) (1 page);
Notice of Appeal (1 page);
Certificate of Transmission under 37 CFR 1.8 (1 page); and
Charge \$440.00 to deposit account 22-0185.

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (202) 331-7111 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

CONNOLLY BOVE LODGE & HUTZ LLP
1990 M Street, N.W., Suite 800, Washington, DC 20036-3425
Telephone: (202) 331-7111 Facsimile: (202) 293-6229

PTO/SB/97 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

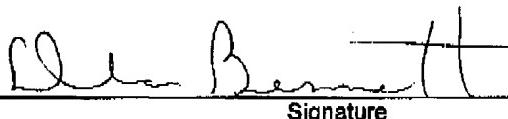
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Certificate of Transmission Under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office

on August 6, 2004
Date



Signature

Debra Bennett

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Change of correspondence address
Fee Transmittal (1 page);
ONE MONTH Request for Extension of Time Under 37 CFR 1.136(a) (1 page);
Notice of Appeal (1 page);
Certificate of Transmission under 37 CFR 1.8 (1 page); and
Charge \$440.00 to deposit account 22-0185.

PTO/SB/122 (06-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS
Application**

Address to: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/527,028-Conf. #1839
Filing Date	March 16, 2000
First Named Inventor	Sylvie Veriac
Art Unit	1641
Examiner Name	G. Gabel
Attorney Docket No.	20198-00053-US

Please change the Correspondence Address for the above-identified application to:

Customer Number:

30678

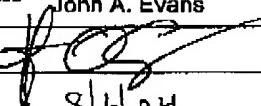
OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Fax		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- Applicant/Inventor
- Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or Agent of record. Registration Number 44,100
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name	John A. Evans		
Signature			
Date	8/6/04	Telephone	(202) 331-7111

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

<input type="checkbox"/> Total of <u>1</u> forms are submitted.
